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STATE BOARD
OF NURSING

VOL2 • Nº1 • MARCH 2007
1ST QUARTER

REGULATORY JOURNAL



Kathy Malloch
RN MBA PhD FAAN
President
Arizona State Board
of Nursing
2002, 2003, 2005, & 2006

RN/LPN Renewal - Time to Check Your License Renewal Date

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ARIZONA STATE BOARD OF NURSING

4747 North 7th Street, Suite 200

Phoenix, AZ 85014-3653

Phone: 602.889.5150

Main fax: 602.889.5155

CANDO fax: 602.889.5238

General e-mail: arizona@azbn.gov

Website: www.azbn.gov

GOVERNOR

The Honorable Janet Napolitano

Joey Ridenour, RN, MN

EXECUTIVE DIRECTOR

Judy Bontrager, RN, MN

ASSOCIATE DIRECTOR/OPERATIONS

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CREATED BY:

Virginia Robertson, PRESIDENT

vrobertson@pcipublishing.com

Publishing Concepts, Inc.

14109 Taylor Loop Road

Little Rock, AR 72223

FOR ADVERTISING

INFORMATION:

Steve McPherson

smcpherson@pcipublishing.com

501.221.9986 • 800.561.4686

This magazine is mailed quarterly to over 90,000 Arizona licensed nurses and reaches every nursing student, hospital administrator and nursing school administrator in the state



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From the Executive Director

JOEY RIDENOUR, RN, MN

Interview with Kathy Malloch RN MBA PhD FAAN PRESIDENT 2002-03 & 2005-06

Dr. Malloch is a nationally known writer and speaker and has been on the Board of Nursing for over seven years. Her primary focus is on consulting and education and is considered an expert in nursing leadership and healthcare innovation. She is highly regarded by nursing leaders internationally and is a regulatory expert in practice breakdown. Dr. Malloch was elected to the National Council State Boards of Nursing, Board of Directors in August 2006 and is currently the Area I Director.

During the recent transition in the Board President's role, I asked Dr. Malloch to share some her "lessons learned" during her tenure on the Board.

Q. What have you learned over the past seven years about nursing regulation that you would like to share with your colleagues and nurse leaders?

A. The experience I have had in nursing regulation has helped me "close the loop" in better understanding that there is a dynamic relationship between practice, education, research and regulation. I also have learned that the "ownership of nursing regulation" is not well understood. Nurses need to understand that we are all owners of regulation and not just the Board of Nursing. The quality and appropriateness of the changes in regulation is the result of the level of engagement of Arizona nurses in the discussions.

Q. What were some of the more significant "lessons learned" during your tenure on the Board?

- A. 1.) Tell the truth,
Tell the truth &
Tell the truth.
- 2.) Board Members need to keep asking questions until the issues are understood.
- 3.) Nursing practice is exponentially more complicated than we ever knew in the past. One example is the system contributions to medical errors versus the individual contributions to patient errors. Research on Practice Breakdown is going to make a significant contribution to how we remediate and understand how to improve the competencies of nurses who place the public at risk or harm. Examples of practice breakdown are lack of attentiveness, lack of professional accountability and prevention.
- 4.) Relationships are "pretty darn important". How we treat people and honor their individualism matters not only during the board processes but everyday in our daily lives.
- 5.) Positions on the Board are more powerful than previously understood. I still get comments on statements I have made in board meetings five years ago.

Q. What does a "highly functioning" Nursing Board Member look like?

The more effective Board Members:

- 1.) know themselves, their personal biases
- 2.) analyzes and re-aggregate a large volume of information and facts; demonstrates skill in understanding complex situations
- 3.) makes tough decisions when the public is at risk or there is high potential for harm
- 4.) demonstrates competence with email, use of the internet and management of word documents
- 5.) have the fortitude to speak openly and candidly - the public wants to know what the Board Member is thinking.
- 6.) focus on Board policy and resist the temptation to get into Board operations
- 7.) know the Nurse Practice Act

- 8.) demonstrates a high level of integrity and builds this into the board processes
- 9.) questions rather than accepts, together with the courage to ask difficult questions in a constructive way
- 10.) sees the big picture but knows when to drill down on specifics
- 11.) is not oriented to past achievements rather than to challenges yet to come

Q. What types of cases over the past seven years have been most significant to you?

A. Chemical dependency cases and scope of practice cases. Asking for chemical dependency evaluations from experts in the field has been critical to not only protect the public but for those nurses who are chemically dependent so they may begin the treatment and recovery process. Seeking independent expert advice has always been important and will be important in the future in not only CD but also other practice issues. Scope of practice violations continues to challenge me. For example, we have had several cases in which nurses have started IVs on nurse colleagues without an authorized order. It is quite obvious this action is beyond the scope as it involves diagnosis and intervention yet the intention of the nurse was to be helpful to a colleague in need. It is difficult to recommend the required discipline when there is a lack of mal intention but poor judgment.

Q. If you were to teach a course to nurse regulators, what would you want to make sure is included in the curriculum?

A. Nurse regulators need to be competent in creating a public policy agenda to better protect the public from unsafe practitioners and setting scopes of practice. They also need to know how to develop a strategic plan for implementing the policy agenda. Finally, they need to evaluate the impact of the policy change to have the evidence that the change in the Nurse Practice Act achieved an expected outcome.



Joey Ridenour, RN, MN
EXECUTIVE DIRECTOR

Arizona Nurses Association will
be presenting **Nurses Legislative
Day** on March 30th at
Banner Desert Medical Center's
new Education Center

1400 S. Dobson
Mesa, AZ 85202

Nurses Legislative Day features a new streamlined schedule that includes keynote speaker Anne McNamara, RN, PhD, Treasurer, American Nurses Association, presenting "From the Southwest to Washington DC: Arizona Nurses on the Move." Other presentations will include information on grass roots lobbying, state board of nursing, using the state legislature website and information on what is happening in the state Legislature from AzNA's Lobbyist Rory Hays. This is a great opportunity to hear from nursing's political experts. For more information and to register for this event, visit www.aznurse.org.

Certified Nursing Assistant Educators Round Table

“Ah-ha Moments”

The Arizona State Board of Nursing's Fourth Annual Certified Nursing Assistant Educators Retreat was attended by over 135 Certified Nursing Educators! The fifteen speakers/round table leaders were outstanding in their subject areas and made this the most successful retreat in the events four year history. Special thanks to program speakers for their sharing their expertise: Dr. Shiela Sorrentino, Dr. Sue Roe, Jennifer Underwood and Paul Dorrance.

Each Round Table at the 2007 CNA Retreat was asked to agree on one major concept learned or shared during the session. Round table leaders capturing these “ah-ha’s” were: Sylvia Balesteri, Janice Bilain, Linda Buchanan-Anderson, Jan Dougherty, Betty Earp, Helen Houser, Jennifer Underwood, Linda Mangerson, Judy Bontrager, Val Smith, Pam Randolph and Joey Ridenour.

These are the **Twelve 2007 CNA “Ah-ha” Moments** for each round table with editorial changes for grammar and sentence structure for clarity:

- **Certified Nursing Assistant May Have Unlimited Attempts for Certification:** NAs may take the skills and written exams as many times as needed in a 2 year period.
- **Career Advisors Have Responsibility to Inform Others that CNA Misconduct May Lead to Denial of Certification:** Career advisors need to inform potential students that criminal convictions may make them ineligible for employment in the CNA/Nursing field.
- **Learn from the Students for Enhanced Teaching Methods:** Learn about what our students bring with them to the classroom in a “getting to know you” session.
- **Integrate Standards in High School Programs:** State Board of Nursing standards and CTE (Career and Technical Education) Standards can and should be integrated as part of the CNA program.
- **Combine Skills Testing I & Mock Skills Testing of Students:** Have students evaluate fellow students with mock skill testing of competencies.
- **Skills Testing II:** Teach skills from the D & S Diversified Handbook.
- **Curriculum Creativity = Exciting Curriculum:** Be creative in the classroom; use imagination to make curriculum



■ Dr. Sheila Sorrentino and Pam Randolph

content relevant and exciting.

- **Finding the Connections for Alzheimer's Patients:** Find the connection between the CNA and the resident with dementia.
- **Continuing Education- CE is driven by staff needs:** Try poster board in-services and additional training sessions for evening, night and weekend staff.
- **Development of Critical Thinking Starts Day 1 and continues:** Start to focus the student to think critically at the beginning of the CNA program and continue to reinforce throughout the course.
- **Pilot Study Medication Technician (PSMT) Must Have Clear Expectations Before Acceptance into the Program:** In selecting PSMT staff, be very clear about the expectations of the role and administer a pre-test on math skills.
- **Prevent Confusion for Test Observers:** The live patient (model) is trained to react according to the skill but this is not in the role of observer.

We want to also extend a special thanks to Pam Randolph and Pam Raman for the outstanding partnerships they have formed with the 150 Certified Nursing Assistant Programs throughout the state. Paul Dorrance from D & S Diversified Technologies shared with the attendees at the conference that “Arizona has the highest first time pass rates in testing of the Certified Nursing Assistants of the 16 states” utilizing D&S as the testing vendor. The past four retreats have been critical in achieving this accomplishment and look forward to the Fifth Annual Certified Nursing Assistant Retreat in 2008!

Joey Ridenour, RN, MN
EXECUTIVE DIRECTOR

Case Study:

SISTER M. RACHEL TORREZ RN, MS, NURSE PRACTICE CONSULTANT

DISHONESTY PLACES PATIENTS AT RISK FOR HARM

Nurse M. was assigned to work in the ICU at a local hospital from 7:00 a.m. to 7:00 p.m. She was assigned two patients. One of her patients was a diabetic who had undergone recent surgery. The patient had orders for an Insulin drip with blood sugar readings by Accu check to be performed every hour. The intravenous Insulin was to be regulated according to a rate which was dependent on the blood sugar readings. The physician was to be notified if there were any questions or problems. The second patient assigned to Nurse M. was stable.

According to the medical record for the patient with diabetes, Nurse M. had documented that she had checked the blood sugar for the patient from 11:30 a.m. until 5:30 p.m. every hour as ordered. Around 6:00 p.m. the patient's son approached the charge nurse requesting that Nurse M. be removed from his mother's care. He said Nurse M. had been very rude to him when he inquired about his mother's condition. The charge nurse went into the patient's room to assess the situation. The charge nurse performed a blood sugar reading on the patient and found that the patient's blood sugar was 71. The recording prior to this was documented in the medical record as 250 by Nurse M. and the Insulin intravenous was infusing at 15 drops a minutes. The order reflected that the Insulin was to be stopped if the blood sugar was less than 120. Nurse M. could not explain why she was infusing the Insulin at 15 drops a minute. The charge nurse stopped the Insulin, called the doctor, and assumed the care of the patient.

The hospital staff reported Nurse M. to the Board of Nursing after they had conducted a thorough internal investigation. It was determined that Nurse M. could not explain why she was infusing the Insulin at an unacceptable rate. She was also unable to show evidence that she had completed a blood sugar testing at 1:30 p.m., 2:30 p.m., and 3:30 p.m. since the accu machines used for the testing did not reflect any stored data for those times. The laboratory retrieved all the stored data from the two accu dose machines used in the ICU and neither had any stored data reflecting that Nurse M. had tested the blood sugars for these three events.

All incoming complaints are assigned to a Nurse Consultant/ Investigator who are then charged with the responsibility of conducting complete and thorough investigations. Nurses are encouraged to provide information regarding the allegations, share their perspectives regarding the incidents or events, and provide any documents that may further explain or refute the allegation.

All these opportunities were provided to Nurse M. She was confident and very sure she recalled the details of her assignment very well. She denied that she could possibly have falsified any

documentation. In a face to face interview with the Nurse Practice Consultant, Nurse M. was asked to explain the discrepancies that were identified in the patient medical record. Nurse M. asked to see the medical record before she answered the question and then admitted she had falsified at least three of the blood sugar readings that she had documented in the medical record. She said since she had not reviewed the medical record prior to submitting her written response, she was now able to see that there was no possible explanation for the discrepancies. Nurse M. had not been honest with her employer or the Board of Nursing staff until she was confronted with the facts in which she had no explanation except that she had falsified her oral and written statements and the documentation in the medical record.

When this case was presented to the Board, Nurse M. was present. After the Board deliberated, the decision was made to place Nurse M. on probation for two years so that her nursing practice could be monitored. In addition the Board also fined (Civil Penalty) Nurse M. for her dishonesty.



NURSE M. HAD NOT BEEN HONEST WITH HER EMPLOYER OR THE BOARD OF NURSING STAFF UNTIL SHE WAS CONFRONTED WITH THE FACTS IN WHICH SHE HAD NO EXPLANATION EXCEPT THAT SHE HAD FALSIFIED HER ORAL AND WRITTEN STATEMENTS AND THE DOCUMENTATION IN THE MEDICAL RECORD.

Nurse M. violated the following Rules (A.R.S. 32-1601(16) (d)(j):

- (d) Any conduct or practice that is or might be harmful or dangerous to the health of a patient or the public.
- (j) violating a rule that is adopted by the board pursuant to this chapter.

R4-19-403 Unprofessional Conduct (B) (5)(6)(25)(26):

- 5. Failing to maintain for each patient a record which accurately reflects the nursing care and treatment provided to a patient.
- 6. Failing to take appropriate action to safeguard a patient's welfare or to follow policies and procedures of a nurse's employer designed to safeguard the patient.
- 25. Practicing in any manner which gives the Board reasonable cause to believe that the health of a patient or public may be harmed.
- 26. Making a written false or inaccurate statement to the Board or the Board's designee in the course of an investigation.

STAFF DIRECTORY

ADMINISTRATION

Joey Ridenour, RN, MN
Executive Director
602.889.5200
jridenour@azbn.gov

Judy Bontrager RN, MN
Associate Director-Operations
& Licensing 602.889.5204
jbontrager@azbn.gov

Valerie Smith RN, MS
Associate Director-Nursing
Practice, Complaints &
Investigations
602.889.5206
vsmith@azbn.gov

Pamela Randolph RN, MS
Associate Director Education
& Evidenced Based Regulation
602.889.5209
prandolph@azbn.gov

Lila Wiemann
Administrative Assistant to the
Executive Director
602.889.5202
lwiemann@azbn.gov

Dolores Hurtado
Assistant to Associate
Director/Nursing
Practice, Complaints &
Investigations
602.889.5158
dhurtado@azbn.gov

Thereasa Huff
Assistant to Associate
Director/Nursing
Practice, Complaints &
Investigations
602.889.5208
thuff@azbn.gov

Cristina Oates
Administrative Assistant to
Associate Director
Operations/Licensing
602.889.5205
coates@azbn.gov

ADVANCED PRACTICE

Karen Grady, MS, RN, FNP, BC
Advanced Practice/RN/LPN
602.889.5182
kgrady@azbn.gov

CANDO

Connie Linck, RN, MN,
CNAA, BC
Nurse Consultant – CANDO
602.889.5156
clinck@azbn.gov

Olga Zuniga
Administrative Secretary –
Monitoring & CANDO
602.889.5157
ozuniga@azbn.gov

EDUCATION

Pamela Raman, RN, MS
Nurse Practice
Consultant/Education
602.889.5176
praman@azbn.gov

Karen Gilliland
602.889.5187
kgilliland@azbn.gov

FISCAL SERVICES

Norma Salter
Accounting Technician
602.889.5211
nsalter@azbn.gov

HEARINGS

Susan Barber, RN, MSN
Nurse Practice Consultant-
Hearing Dept
602.889.5151
sbarber@azbn.gov

Debra Blake, Paralegal
Legal Assistant -Hearing Dept.
602.889.5183
dblake@azbn.gov

Vicky Driver
Admin. Assistant-Hearing Dept
602.889.5162
vdriver@azbn.gov

INVESTIGATIONS NURSE PRACTICE CONSULTANTS

Betty Nelson, RN, MS
602.889.5169
bnelson@azbn.gov

Jeanine Sage, RN, MSN
602.889.5174
jsage@azbn.gov

Mary Rappoport, RN, MN
602.889.5184
mrappoport@azbn.gov

Nan Twigg, RN, MSN
520.615.4945
ntwigg@azbn.gov

Sister Rachel Torrez, RN, MS
602.889.5180
srachel@azbn.gov

Stephanie Nelson, RN, MS
602.889.5179
snelson@azbn.gov

Sydney Munger, RN, MS
602.889.5186
smunger@azbn.gov

SENIOR INVESTIGATORS

Duncan "Cory" Polak
602.889.5172
cpolak@azbn.gov

James Williams
602.889.5167
jwilliams@azbn.gov

Jeanne Crain
602.889.5178
jbauer@azbn.gov

Kirk Olson
602.889.5171
kolson@azbn.gov

Ronald "Ron" Lester
602.889.5159
rlester@azbn.gov

LEGAL SECRETARIES

Barbara Melberg
602.889.5193
bmelberg@azbn.gov

Dorothy Lindsey
602.889.5177
dlindsey@azbn.gov

Esther Garcia
602.889.5173
egarcia@azbn.gov

Karen Gilliland
602.889.5187
kgilliland@azbn.gov

Trina Smith
602.889.5175
tsmith@azbn.gov

INFORMATION TECHNOLOGY

Cory Davitt
Network Operations Director
602.889.5213
cdavitt@azbn.gov

Adam Henriksen
Information Technology
Director/Webmaster
602.889.5231
ahenriksen@azbn.gov

LICENSING

Becky Melton
RN/LPN Exam
602.889.5190
baranyos@azbn.gov

Debbie Kunkle
RN/LPN Renewals
602.889.5195
dkunkle@azbn.gov

Cristina Oates
Advanced Practice/School
Nurses
602.889.5205
coates@azbn.gov

Donna Frye
Fingerprints/Endorsements
602.889.5191
dfrye@azbn.gov

Helen Tay
CNA Exam/Endorsements
602.889.5189
htay@azbn.gov

Jene Martinez
RN/LPN/CNA
602.889.5224
jmartinez@azbn.gov

Paula Delphy
RN/LPN Endorsements
602.889.5192
pdelphy@azbn.gov

Rhonda Rogers
CNA.Renewals
602.889.5188
rrogers@azbn.gov

MAILROOM

Derek Hardin
602.5215
dhardin@azbn.gov

MONITORING

Erica Bailey
Senior Investigator
602.889.5160
ebailey@azbn.gov

Brent Sutter
Legal Secretary
Monitoring & CANDO
602.889.5168
bsutter@azbn.gov

RECEPTIONISTS

Marlane Brosseau
602.889.5199
mbrosseau@azbn.gov

Susan Kingsland
602.889.5197
skinsland@azbn.gov

Tawni Rowen
602.889.5196
trowen@azbn.gov

RECORDS

Anne Parlin
602.889.5207
aparlin@azbn.gov



Education Corner

PAMELA RANDOLPH RN, MS
ASSOCIATE DIRECTOR/EDUCATION
AND EVIDENCE BASED REGULATION

Statewide Educator's Meeting

On October 12, 2006, 67 persons representing all nursing education programs in Arizona attended the Annual Statewide Educator's meeting at Rio Salado College. Board staff presented survey information from nursing programs in Arizona regarding patient care hours, use of clinical simulation, and standardized testing. A discussion of barriers to nursing program expansion was a focus of the meeting. For further information on the meeting or surveys reported, please e-mail prandolph@azbn.gov.

Patient Care Hours

A survey of nursing programs revealed that patient care hours range from: 284 to 312 with a mean of 294 in PN programs, 521 to 1048 with a mean of 743 hours in associate degree RN programs, and 365 to 1158 with a mean of 901 in BSN programs.

Clinical Simulation

There was a lack of consensus in defining the term, "clinical simulation". Hours spent in clinical simulation activities range from 0 to 256 across all programs. When simulation was used, it frequently occurred in basic nursing courses, although some programs employ simulation across the curriculum. The faculty debriefing process was considered crucial to student learning. Advantages of stimulated clinical experiences are increased student confidence and preparation for patient care experiences. Negative factors include increased faculty time, student anxiety, and students not taking it seriously.

Standardized Testing

A survey on the use of standardized testing revealed that the most frequently used standardized tests for progression and graduation are the Health Education

Systems, Inc. (HESI) and Educational Resources (ERI) exams. Programs report that the tests help build student confidence, encourage critical thinking, reinforce key concepts,

contribute to higher NCLEX® pass rates, and provide data for program evaluation. Disadvantages included expense, faculty time commitment, data management, technical problems, monitoring retakes, and content differing from course content.

Nursing Program Expansion

Meeting participants discussed barriers to nursing program expansion. Lack of clinical placements in specialty areas of nursing is a major challenge. With the geographic expansion of current programs and the establishment of new programs, participants feared that existing local programs will cut admissions due to lack of appropriate clinical placements or faculty. Clinical facilities are limiting placements due to fatigue of nurses already working within the context of a nursing shortage, the need to utilize staff to orient newly licensed nurses, the level of student not appropriate to the clinical area, and large numbers of students during daytime hours.

Another barrier to program expansion is lack of qualified faculty. Utilizing facility based nurses as clinical faculty is one solution, however these nurses frequently require extensive mentoring in teaching and evaluating pre-licensure students. Clinical faculty members may teach for only one rotation, requiring the program to engage in ongoing hiring and orientation of clinical faculty. Strategies to recruit and retain faculty were discussed.

All participants agreed the day was successful for sharing information and offered suggestions for next year's meeting.

NCLEX® Item Development

The following Arizona nurses represented Arizona in the NCLEX item development process for the second through fourth quarters of FY 2006: Dina Faucher, Jane Lacovara, Carol Delafontaine, Loria

Hute, Bridget Jablonski, Deborah Evinrude, Cheryl Kelly, Marilyn Whittenton, Pamela Raupp, Manora Maddela, and Charles Silveri. The Board thanks all persons who volunteered to participate in the NCLEX process. It is through their contribution and expertise that NCLEX remains legally defensible and psychometrically sound and is considered the "gold standard" for licensing exams.

BOARD ACTIONS ON EDUCATION MATTERS

November 2006

- Applications for program change were approved from Grand Canyon University (geographical location), Central Arizona College (increase enrollment), and Mohave Community College (paramedic to RN program).
- Northland Pioneer College was granted 2 year nursing program approval with a report to the Board in six months
- The Board adopted the proposed "Competency to Practice Nursing Evaluation Criteria" as a working document.

Train the Trainer

An educational session for Pilot Study Medication Technician (PSMT) Instructors will be held at the Board offices on March 1-2, 2007. PSMT instructors are RNs working at one of the 6 pilot long-term care facilities who will participate in the education of C.N.A.'s selected to assume the role of medication technician. There are a limited number of seats available to other nurse educators who would like additional education in classroom management, test item construction, teaching methods, selection of appropriate students and other topics of interest to C.N.A. and nursing instructors. The first day will focus on general teaching effectiveness and the second day will consist of (PSMT) curriculum review and application of concepts. The cost is \$50.00 per day. Participants may register for one or both days. Please contact Karen Gilliland at kgilliland@azbn.gov or 602-889-5187 for registration information.

Regulation

by Pamela Randolph RN, MS
ASSOCIATE DIRECTOR/EDUCATION AND
EVIDENCE BASED REGULATION

RUNDOWN

Rulemaking R4-19-215; R4-19-301; R4-19-302; R4-19-505; R4-19-506; R4- 19-507; and R4-19-508.

These individual rules need revisions to address issues that have arisen since their adoption. A rulemaking docket was filed and published the Administrative Register on March 3rd, 2006. Amendments to Article 2 (R4-19-215) will incorporate a process for rescinding the approval of an out-of-state nursing program that does not substantially meet Board standards.

An open public hearing was held on January 17, 2007 with no persons testifying against the rulemaking. The notice of final rulemaking was adopted by the Board and submitted to the Governor's Regulatory Review Council. Rule changes are summarized below:

Amendments to Articles 2 and 3 (R4-19-302) provide the Board process for revoking approval of an out of state nursing program and the authority to prescribe additional licensure requirements for an individual who graduates from a revoked nursing program.

Amendments to Article 5 (R4-19-505) will extend the waiver of certification for clinical nurse specialists practicing in the area of maternal/infant health or women's health since there is no certification exam. Standards for keeping an advanced practice certificate active and

for education to increase competency within an advanced practice specialty (R4-19-508) are incorporated. Advanced practice nursing practice within a specialty area similar to the 960 hour (in 5 years requirement) for RNs and LPNs will be required. Other rules were revised to make technical and grammatical changes to improve clarity and internal consistency (R4-19-506; R4-19-507).

The proposed rules are posted on the website.

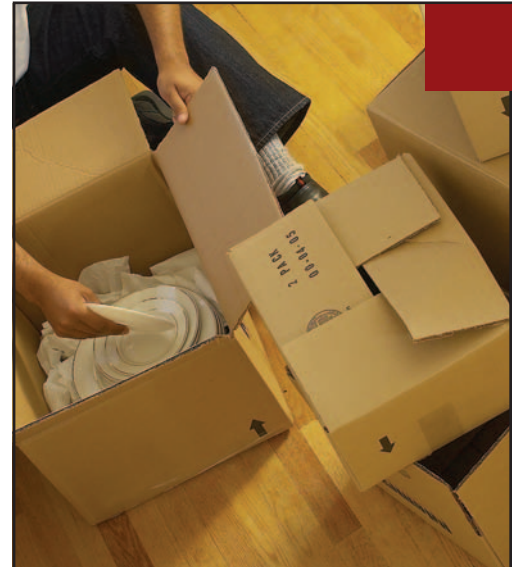
Articles 1 and 4

Extensive revisions of Articles 4 (Regulation) and 1 (Definitions and Time-frames) are underway. A preliminary review will be conducted by Board staff, Board members, Education Committee, and Scope of Practice Committee. Following these reviews, a

notice of proposed rulemaking will be placed on the Board website for general public review and comment.

The person to contact at the Board regarding rules is:

Pamela Randolph
Nurse Practice Consultant
602-889-5209
e-mail: prandolph@azbn.gov
Fax: 602-889-5155



Notice of Address or Name Change with the Arizona State Board of Nursing

If you have moved or had your name changed, please notify the Arizona State Board of Nursing as soon as possible.

**4747 North 7th Street
Suite 200
Phoenix, AZ 85014
Phone: 602.889.5150
Main fax: 602.889.5155
arizona@azbn.gov
www.azbn.gov**

SBAR & HEALTHCARE PROVIDERS: A VERY GOOD MATCH

SUBMITTED BY: BARB AVERY, PROJECT DIRECTOR, PATIENT SAFETY INITIATIVES, ARIZONA HOSPITAL & HEALTHCARE ASSOCIATION

Joint Commission reports that communication breakdown is the leading root cause of sentinel events reported from 1995-2006.

In healthcare, accurate communication is not just essential during critical events such as cardiac arrests, surgeries or trauma cases, but is also critical in day-to-day operations, such as the “handoff communications.” Safe, effective clinical care depends on reliable, flawless communication between caregivers. Communication breakdowns between healthcare providers are a central feature in episodes of avoidable patient harm. For this reason, the Joint Commission issued a new requirement as part of its National Patient Safety Goal 2, requiring facilities to implement a standardized approach to handoff communications.

Because the work of healthcare often occurs in hurried, time-crunching interactions involving human beings with varying styles of communication and cultural differences, a standardized approach to information sharing will ensure that patient information is consistently and accurately imparted. The Arizona Hospital and Healthcare Association (AzHHA) Patient Safety Steering Committee believes employing “SBAR communication” among all healthcare providers would make a significant and positive impact on professional-to-professional communication and ultimately, patient safety. Originating from the nuclear submarine service, **SBAR** stands for:

- **S – Situation:** What is happening at the present time?
- **B – Background:** What are the circumstances leading up to this situation?
- **A – Assessment:** What do I think the problem is?
- **R – Recommendation:** What should we do to correct the problem?

SBAR creates a shared mental model for effective information transfer by providing a standardized structure for concise factual communication among clinicians. Consider the many **SBAR** communication opportunities that involve transferring important patient information:

- nurse-to-nurse such as change of shift report or patient transfer;
- physician-to-physician; and



Because the work of healthcare often occurs in hurried, time-crunching interactions involving human beings with varying styles of communication and cultural differences, a standardized approach to information sharing will ensure that patient information is consistently and accurately imparted.

- nurse-to-physician.

Additionally, **SBAR** would improve other workplace communication, such as staff education, policy briefings, information on new procedures, administrative team meetings and even e-mail communication.

AzHHA's Patient Safety Steering Committee—as part of its patient safety initiative, Safe & Sound—is creating a new **SBAR** tool kit, which will be available in spring 2007. AzHHA's goal is to facilitate statewide implementation of **SBAR** with all healthcare providers.

Healthcare professionals can learn to communicate in ways that are effective and meaningful, which will lead to a reduction in harm, increased satisfaction for providers and overall better outcomes for our patients.

SCOPE OF PRACTICE COMMITTEE

JUDY BONTRAGER, RN, MN
ASSOCIATE DIRECTOR OF OPERATIONS



CALL FOR MEMBERS

The Scope of Practice Committee is currently recruiting for nurses who are clinical experts in a specialty area and interested in volunteering to serve on the committee for a two-year term beginning June, 2007 through June, 2009.

The committee has a rich and diverse membership that includes staff nurses, administrators and faculty members from the various agencies and health care settings throughout the state. Arizona is recognized nationally for their excellent advisory work. The Board would encourage each of you to consider this "growth experience" in being part of a constituency that provides advice/recommendations regarding RN/LPN scope of practice.

Examples of the work product of the committee are found in the Advisory Opinions on the ASBN website:
www.azbn.gov.

For 2007, goals of the Scope of Practice Committee are to:

1. Review and revise current advisory opinions.
2. Respond to the changing health care environment by addressing scope of practice issues and developing advisory opinions when appropriate.
3. Discuss and deliberate scope of practice issues when requested and make recommendations to the Board regarding specific issues.

The committee meets four times per year, usually in March, June, August and November from 10 am – 2 pm in the Board Room at 4747 North 7th Street, Suite 200, in Phoenix.

If you are interested in applying to serve on the Scope of Practice

Committee, please submit your resume by March 16, 2007 to:

Judy Bontrager, RN, MN
Arizona State Board of Nursing
4747 N. 7th Street, Suite 200
Phoenix, Arizona 85014

Telephone interviews will be conducted in March and April. The Board will formally appoint the scope of practice committee members at their May, 2007 Board meeting.

Is Your License Due for Renewal?

Question: What percentage of the Nurses Due for Renewal by June 30, 2006 Renewed on Time?

Answer: 95%

If the date on your license renewal is 6/30/2007, you may renew your license NOW and receive a license valid until 6/30/2011. Last year over 800 nurses whose license was due for renewal in June, 2006 had already renewed their license by March.

For online renewal follow these steps:

Simply access the internet & board website: www.azbn.gov and have your Visa or MasterCard credit card available for payment. This is also your opportunity to update your demographic information as well as completing data not previously captured in prior renewals.

Five Immediate Benefits to you for renewing online are:

- 1.) Faster processing time of "minutes" versus days required for hard copy processing.
- 2.) Immediate printout that your renewal is being processed.

3.) Renew anytime 24/7 – anyplace and anytime of the day that works for you.

4.) Your direct online entry of information is immediate and reduces the potential for errors in transcribing the information.

5.) Save money – there is a \$10 reduction in the renewal fee due to completing the process online.

Please Note: Reminders for you to renew are now through the AzBN Journal for the first two quarters of 2007 as well as notification for renewing through your email address. Please check to see if your email address is current when updating your demographic information.

For those approximate 5% who did not renew by July 15, 2007, a letter will be sent stating that your renewal process had not been completed by June 30, 2007.

In 2006, approximately 10% did not need to renew for a number of reasons; i.e. you moved to a new home state and no longer need the license or perhaps you requested to inactivate your license.

Finally, if you do not have access to a computer, you may request a hard copy of the renewal application from the Board.

AzBN Welcomes New Board Member: Ms. Constance Woulard RN MSN

We are pleased to announce that Governor Napolitano has appointed Ms Constance Woulard to the Board effective February 2007. Ms. Woulard is currently employed at Carl T Hayden VA Medical Center in Nursing ADPAC/Nursing Recruitment. She has had 13 years of experience in home care, acute care, long term care and hospice. She is also knowledgeable and experienced in nursing education and informatics. Ms Woulard also is currently providing clinical instruction for senior level students at Grand Canyon University and clinical instruction for entry-level medical surgical students at Rio Salado Community College.

Ms. Woulard relocated to Arizona from Mississippi after Hurricane Katrina in November 2005. She replaces Judith Rich on the Board and her term expires 6/30/2010.

New Associate Director Appointed Pamela Randolph RN MSN

WE ARE ALSO PLEASED TO ANNOUNCE THAT MS. PAMELA RANDOLPH, Nurse Practice Consultant, Education/CNA Training Programs, has been appointed to the Associate Director for Education & Evidenced Base Regulation position. Over the past 7 years in her role as Education Consultant, Pam has been involved in collecting data related to student enrollments, attrition, capacity and other "evidence" on which the education committee has made decisions. She will take the lead in the partnership with ASU workforce studies and also combine the position with education and doing studies related to evidenced based regulation, i.e. similar to the pilot study on medication technicians and TERCAP. Currently Pam oversees the Medication Tech Pilot Program which will examine the impact to patient safety of allowing CNA's who complete a 100 hour course, to administer medications to stable residents in 6 long term care facilities, as well as developing new recommendations to Rules & Regulations.

Effective January 2007: New Electronic Complaint Process

The purpose of instituting the electronic complaint process is to make the submission of complaints easier for you to complete as well as streamlining the process. We continue to be committed to having most complaints to the Board for review in a 6 month cycle time. The following pages illustrate the pertinent screens used in the process. Upon receiving the information, you will receive a confirmation that the complaint has been received. Please let us know if you have any suggestions or recommended changes to the process.

*AzBN Nurse Practice Consultants
and Senior Investigators*

Arizona State Board of Nursing - Discipline & Complaints - File a Complaint

https://www.azbn.gov/DisciplineComplaintForm.asp

Arizona State Board of Nursing - Discipline & Complaints...

ARIZONA STATE BOARD OF NURSING
Joey Ridenour
Executive Director

HOME RESOURCES ONLINE TOOLS COMMUNITY ABOUT CONTACT

My Services
Renew your RN/LPN license, purchase a duplicate or update information **online** using My Services.
[Click here to get started](#)

Latest News
02/01 Faculty Recruitment January 2006 - Revised (PDF)
01/16 Board Update on CNA Program Rules
12/12 Nurse Practice Act Test Now Available Online
12/01 Invitation to Open Public Hearing on Proposed Rulemaking
[MORE](#)

Discipline and Complaints - RN/LPN/CNA Complaint Form

Prior to submitting a complaint, please review the [Mandatory Reporting Laws & Rules \(PDF\)](#), [Nurse Practice Act](#) and [FAQ's for Properly Submitting a Complaint](#) shown below.

1. [Who can file a complaint?](#)
2. [What conduct should be reported?](#)
3. [What conduct is not typically reportable to the Board?](#)
4. [When should a report be made?](#)
5. [Where should the complaint be sent?](#)
6. [How do I file a complaint?](#)
7. [Is a failure to report those who may be a risk to the public a violation of the Nurse Practice Act?](#)
8. [Will the person know who filed a complaint?](#)
9. [Will the public be aware a complaint or self-report has been received?](#)
10. [What happens with the complaint?](#)
11. [How long does the investigative process take?](#)
12. [Can the license/certificate holder or applicant work while they are under investigation?](#)
13. [What can the subject of the complaint or people making the complaint do to assist in the investigative process?](#)
14. [What happens when the case is presented to the Board Members?](#)
15. [Who can address the Board Members?](#)
16. [What are the possible Board Members decisions or actions?](#)
17. [When is the Board decision final?](#)

To submit a new complaint about an RN, LPN or CNA, please click the "Submit a New Complaint" button below.

[SUBMIT A NEW COMPLAINT](#)

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Arizona State Board of Nursing - Discipline & Complaints - File a Complaint

https://www.azbn.gov/DisciplineComplaintForm.asp

Arizona State Board of Nursing - Discipline & Complaints...

ARIZONA STATE BOARD OF NURSING
Joey Ridenour
Executive Director

HOME RESOURCES ONLINE TOOLS COMMUNITY ABOUT CONTACT

Discipline and Complaints - RN/LPN/CNA Complaint Form

Please complete the form below to the best of your abilities. When finished, click once on the "Submit Complaint" button at the bottom of the page to submit the form for processing.

NOTE: You will receive an email confirmation with the contents of your form submission once the form has been successfully submitted.

Complainant Information (Person Filing Complaint):
Please complete all required (*) fields below with your information.

Your First Name:
Your Last Name:
Title:
Agency or Organization:
Address Line 1:
Address Line 2:
City:
State:
Zip Code:
Email Address:
Day Phone Number/Ext:
Evening Phone Number/Ext:

Your Complaint is Against (Respondent):
Please complete as many of the fields below as you can.

Respondent First Name:
Respondent Last Name:
License/Certificate Number:
Last 4 of Social Security Number:
Phone Number:
Address Line 1:
Address Line 2:
City:
State:
Zip Code:

Complaint Facts:
Be sure to include complaint facts including: dates, times and locations of incidences; statements made; and any behaviors which were observed by licensees/certificate holders.

Witness Information:
Be sure to include witness names, addresses and telephone numbers, and statements regarding incidents:

Supporting Documentation:
Please use the fields below to include copies of relevant supporting documents such as patient record including patient name and/or medical record number, incident reports, memos, written statements, narcotic count sheets, Pivots reports, narcotic audits, urine drug screen results, anecdotal/counseling notes, time cards, personnel policies and procedures, and payroll reports. Alternatively you can email supporting documentation to complaints@azbn.gov or fax to (602) 899-5195.

Supporting Document 1: [Browse](#)
Supporting Document 2: [Browse](#)
Supporting Document 3: [Browse](#)
Supporting Document 4: [Browse](#)

NOTE: As required by A.R.S. § 32-1054(L), "information received and records kept by the Board as a result of an investigation are not available to the public."

Please be advised that the applicant/licensee/certificate holder may be furnished a copy of the complaint upon request. However, if the disclosure of your name will pose a risk to you, a copy of the complaint with redacted ID information may be provided. If in the Board's discretion, there is a risk of identification, the Board reserves the right to refuse furnishing a copy of the complaint.

Verification by Oath or Affirmation:

I verify that the statements are true in every respect; that I have not suppressed any information that would affect this complaint; that I will conform to ethical standards of conduct and obey the laws and rules of the Arizona State Board of Nursing; that I have read and understand that failure to disclose the requested information or disclosure of false information or disclosure of misleading information may constitute fraud and may result in criminal prosecution.

☐ I agree to the Verification by Oath or Affirmation

[SUBMIT COMPLAINT](#)

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NEW ELECTRONIC COMPLAINT PROCESS CONTINUED>>

Questions & Answers to Properly Submit Complaints to the Arizona State Board of Nursing

THEREASA BERRY
ASSISTANT TO ASSOCIATE DIRECTOR/NURSING
PRACTICE, COMPLAINTS & INVESTIGATIONS

VALERIE SMITH RN, MS
ASSOCIATE DIRECTOR, NURSING PRACTICE,
COMPLAINTS & INVESTIGATIONS

1. Who can file a complaint?

Anyone can file a complaint, however, law mandates certain individuals and institutions. Pursuant to 32-1664 (B):

"A licensee, a certificate holder, and a health care institution as defined in §36-401 shall, and any other person may, report to the board any information the licensee, certificate holder, health care institution or individual may have that appears to show that a licensee or certificate holder is, was or may be a threat to the public health or safety."

Sources of complaints related to licensees/certificate holders may include employers, coworkers or other healthcare professionals, patient or family members, law enforcement, self-reports, and/or other regulatory agencies.

Sources of complaints related to applicants for licensure/certification may include responses to questions asked on the application, information related to a current or prior investigation and discipline in another state, and/or information received as a result of a criminal background check.

2. What conduct should be reported?

Conduct that violates expected standards of care that may result in various degrees of harm. There is no list of what should be reported, as it is a matter of judgment for the person making the report based on all the relevant factors.

Examples of conduct that demonstrates poor judgment or skill resulting in violations of the Nurse Practice Act that are reportable to the board are: suspected drug diversion, failing to account for wastage of control drugs/falsification of documents, impairment, positive drug screen without a valid prescription, misappropriation/theft, exploitation of a vulnerable patient, physical/verbal abuse, patient neglect, sexual abuse/boundary violations, falsification of documents, single serious medication errors or repeated medication errors or charting errors, giving medications without an authorized order, criminal charges/convictions, failing to assess or intervene in behalf of a patient.

Please note, violations are NOT limited to direct patient care or incidents occurring while on duty as a nurse/CNA.

Effective September 18, 2003, and pursuant to HB 2361, license and certificate holders are required by law to report criminal charges that may affect patient safety to the board, in writing, within ten days from when the

charge(s) are filed.

You are encouraged to become familiar with the laws and rules of the Board of Nursing. The "The Nurse Practice Act" is available (at no charge) on our website at www.azbn.org or may be purchased by contacting the board by phone or in writing.

3. What conduct is not typically reportable to the Board?

Examples of low risk issues not involving patient care, professional judgment or wrongdoing that do not require reporting to the Arizona Board of Nursing are: rudeness to peers, co-worker disputes, personality conflicts, absenteeism, tardiness, labor-management disputes such as work schedules/wages/wrongful termination.

Facility specific operational issues that are under the jurisdiction of the Arizona Department of Health Services or other state agencies should not be reported to the Board of Nursing.

4. When should a report be made?

Emergent matters involving suspected drug diversion or chemical impairment may be reported immediately to the CANDO Nurse Consultant, Connie Linck, RN, MN, CNAA, BC by calling the number listed under contacts on www.azbn.org or **602 889-5156**. The call should be followed with a written complaint stating the "who, what, where and when" of the events.

Written complaints should be reported as soon you have substantiated or otherwise have reasons to believe that a violation of the Nurse Practice Act has occurred and you have followed the policies within your facility regarding mandatory reporting. If the facility or agency's administrators refuse or delay reporting, it is appropriate for a staff nurse or nurse manager to take responsibility for reporting to the Board.

5. Where should the complaint be sent?

You can Submit your complaint Online at www.azbn.gov Select the Resource tab and choose Discipline & Complaints. At the bottom of your screen, select the "Submit a New Complaint" button.

**You may also Submit your complaint in writing to:
Arizona State Board of Nursing
Complaints/Investigations
4747 North 7th Street, Ste. 200
Phoenix AZ 85014**

Complaint forms can be found on our website or by email request at arizona@email.gov or requested by calling 602.889.5150

6. How do I file a complaint?

Initial reports to the Board should be in writing except for emergent matters such as suspected drug diversion /impairment or sexual abuse complaints. Provide as much detail as possible regarding the "who, what, where, why and how".

Identify the nurse or certified nursing assistant involved, including the correct spelling of the name, license or certificate

number, last four digits of the social security number (if available) to assist in identifying the correct individual. If available, provide last known address and phone number of the individual.

Provide a detailed summary of each allegation of the Nurse Practice Act, including dates of each alleged incident and the medical record number or name of the patient involved. Supplying the medical record number or name of the patient is not a violation of confidentiality or HIPPA.

Be very specific in describing the event including the date and location of incident.

Provide a list of any witnesses. The Board is interested in first hand observations based on personal knowledge and not on hearsay from others.

Provide legible copies of relevant records/information.

Be sure to include your contact information.

Reporting forms are not required, but are available on our website (www.azbn.org) or can be sent to you via fax or mail by calling 602-889-5150. Additionally you may now submit complaints by email to complaints@azbn.gov.

7. Is a failure to report those who may be a risk to the public a violation of the Nurse Practice Act?

In addition to the mandatory reporting law, 32-1664(B), failure to report is a violation of the nurse practice act, A.R.S. §32-1601 (16) (k) and A.A.C. R4-19-403 (7,8):

§32-1601 Unprofessional conduct includes the following whether occurring in this state or elsewhere:

(16) (k) Failing to report to the board any evidence that a professional

or practical nurse or nursing assistant is or may be:

(i) Incompetent to practice

(ii) Guilty of unprofessional conduct

(iii) Mentally or physically unable to safely practice nursing or to perform nursing related duties. A nurse who is providing therapeutic counseling for a nurse who is in a drug rehabilitation program is required to report that nurse only if the nurse providing therapeutic counseling has knowledge that patient safety is being jeopardized.

A.A.C. R4-19-403 For the purposes of A.R.S. §32-1601, a practice that is or might be harmful or dangerous to the health of a patient or the public includes the following:

7) Failing to report to the Board a licensed nurse whose work history includes conduct, or pattern of conduct, which leads to actual or potential adverse patient consequences threatening public health and safety;

8) Failing to take action in a health care setting to protect a patient whose safety or welfare is at risk from incompetent health care practice, or to report such practice to employment or licensing authorities; are violations of the Nurse Practice Act.

8. Will the person know that who filed a complaint?

The applicant/licensee/certificate holder may be furnished with a copy of the complaint upon request. However, if disclosure of the name will pose a risk to the person making the complaint, a copy of the complaint with redacted ID information may be provided. If in the Board's discretion, there is a risk of identification, the Board reserves the right to refuse furnishing a copy of the complaint.

CONTINUED >>

9. Will the public be aware a complaint or self-report has been received?

Once a complaint is received, the license/certificate or application will be identified, as “complaint/self report received” should anyone should contact the Board via the online verification or by phone to check the status.

Specific information regarding the allegation is not provided to the public. As required by ARS §32-1664(L) “information received and records kept by the Board as a result of an investigation are not available to the public.”

10. What happens with the complaint?

When a complaint or self-report is received by the Board, it is first reviewed to determine jurisdiction. If the Board has jurisdiction, the license/certificate or application is flagged with a status of “Complaint/Self Report”, an investigator and a case number are assigned. Notification letters are sent and an investigation begins. The respondent is made aware of the allegations and is given an opportunity to respond with information regarding the event. The investigator collects objective information from a number of sources, interviews the subject of the complaint (“the respondent” or the “applicant”) and other witnesses, and then compiles the findings into an investigative report to present at a board meeting for review and action.

11. How long does the investigative process take?

This process takes an average of six to nine months to complete, depending on the complexity and seriousness of the alleged conduct. Some high risk/ high harm investigative cases have been completed in 1 month.

12. Can the license/certificate holder or applicant work while they are under investigation?

The ability to work as a nurse or CNA is unrestricted during the investigation, as long as the license or certificate remains active. However, Applicants are not issued a license/certificate until the conclusion of the investigation.

13. What can the subject of the complaint or people making the complaint do to assist in the investigative process?

If you are the subject of the complaint: keep the board apprised of any changes in your address and phone number, and respond promptly to any requests for information or documents.

If you have filed a complaint: submit all written documentation regarding your concerns and record any observations and impressions concerning the incident.

14. What happens when the case is presented to the Board Members?

The Board meeting is an open public meeting where investigative reports related to complaints that have been received and investigated by staff are reviewed to determine, based upon evidence in a case, whether there has been a violation of the Nurse Practice Act.

Board members will deliberate and make a motion, stating what action should occur.

15. Who can address the Board Members?



If you have submitted a complaint or you have had a complaint submitted against your application or your license/certificate, you are welcome to attend the Board meeting to hear the discussion and board decision. The Board Meeting is not a hearing but you may choose to give a verbal presentation (up to 5 minutes), providing information you feel is pertinent for the Board to consider. You may also choose to just be available to respond to their questions, or you may be present and not speak at all.

16. What are the possible Board Members decisions or actions?

Board actions are categorized as: Dismissal, Non-disciplinary Action, Disciplinary Action, and Administrative Violations. This information is available to the public. Once the case has gone to Board and action is taken, the complaint/self report status is closed and the licensee/certificate holder's record updated to reflect the Board's action or pending action.

DISMISSAL

Dismissal- Evidence does not support that the case has merit or that there has been a violation of the Nurse Practice Act.

NON-DISCIPLINARY

Letter of Concern - A letter from the Board expressing concern that a licensee, certificate holder or applicant may have been engage in questionable conduct that is considered low risk or harm to the public. A letter of concern issued by the Board is not an appealable agency action.

DISCIPLINARY ACTIONS

Civil Penalty- A monetary fine issued by the Board, not to exceed \$1,000, given singly or in combination with any disciplinary action for a violation of the Nurse Practice Act.

Decree of Censure-This is an official discipline by the Board that the nurse's conduct violated the Nurse Practice Act but does not represent a continued risk to the patient/public.

Probation-This action allows the nurse to continue working during the period of probation subject to compliance with the terms and conditions. During the period of probation the nurse must be supervised in their practice and complete certain requirements which are aimed at rehabilitation or educating the nurse in his/her area(s) of practice. For example, a nurse with a sub-

stance abuse issue may be required to enter and complete treatment, attend A.A./N.A. meetings, abstain from alcohol and other drug use along with other requirements. A nurse who lacks sufficient knowledge of medications or safe administration may be required to take a pharmacology course, etc.

Suspension-A person who has been suspended may not practice during the period of suspension. A person who has been suspended has terms and conditions which must be fulfilled during the period of suspension, before being allowed to resume practice. Examples of terms and conditions may include completing a refresher course, psychological or substance abuse treatment in addition to other requirements. A licensee that has been suspended often has a period of probation following successful completion of the terms of suspension.

Revocation-This action prohibits the nurse/certificate holder from practicing for a minimum of five years, pursuant to A.A.C. R4-19-404. When a license/certificate has been revoked, the applicant for re-issuance must provide detailed information to the Board that the reason for revocation no longer exists and that the issuance of a license/certificate would no longer threaten the public health or safety. A.A.C. R4-19-404 or R4-19-815) The individual whose license/certificate has been revoked may not practice or otherwise indicate to the public that they hold a license/certificate.

Denial- A person (applicant) who has been denied a license/certificate may not practice and is not eligible to reapply to the

Board for a period of five years.

Voluntary Surrender – A Consent Agreement has been signed in which an APRN, RN, LPN, CNA has voluntarily surrendered their license or certificate.

ADMINISTRATIVE VIOLATIONS

Administrative Penalty- A penalty/fine given to a licensee or certificate holder who has worked on an expired license/certificate, or failed to notify the Board of an address change within 30 days. It is not reportable to NCSBN or other national data centers.

17. When is the Board decision final?

For discipline to be final and in effect, a person must either consent to the discipline as voted upon by the board by signing a “Consent Agreement” or if not signed, the person has had an opportunity for a hearing. Hearings are conducted at the Office of Administrative Hearings and the person conducting the Hearing is an Administrative Law Judge who is an attorney.

The Administrative Law Judge recommended “Findings of Fact, Conclusions of Law and Order” and transcripts of the Hearing are reviewed by the Board Members prior to voting on the appropriate disciplinary actions (if any) to be taken. If discipline is determined to be appropriate by the majority of the Board Members, a “Board Order” is then the final decision.

The respondent or applicant may file a motion for rehearing or review of the decision if there has been one of the seven caused listed in the Rules that materially affected the individual rights.



SELECTS THE PHILIPPINES AS AN INTERNATIONAL TESTING SITE FOR NCLEX® EXAMINATIONS

CHICAGO – The National Council of State Boards of Nursing (NCSBN®) has selected Manila, the capital city of the Philippines, as a new site for the administration of the NCLEX® examinations. NCSBN's Board of Directors made the decision to expand the number of sites at its Feb. 8, 2007, meeting.

Faith Fields, MSN, RN, president, NCSBN Board of Directors, comments, "The Philippine government has shown a deep commitment to ensuring a secure test center in Manila and has been very responsive to NCSBN concerns. Placing a test site in the Philippines will allow for greater customer service to nurses without compromising the goal of safeguarding the public health, safety and welfare of patients in the U.S."

Offered abroad since January 2005, the current international sites for NCLEX examinations are in London, England; Seoul, South Korea; Hong Kong; Sydney, Australia; Toronto, Montreal, and Vancouver, Canada; Frankfurt, Germany; Mumbai, New Delhi, Hyderabad, Bangalore, and Chennai, India; Mexico City, Mexico; Taipei, Taiwan; and Chiyoda-ku and Yokohama, Japan.

Intended for the purposes of domestic nurse licensure in U.S. states and territories, all security policies and procedures currently used to administer the NCLEX examination domestically will be fully implemented at this new site. At this time, no schedule of implementation has been set.

The National Council of State Boards of Nursing, Inc. (NCSBN) is a not-for-profit organization whose membership comprises the boards of nursing in the 50 states, the District of Columbia and four U.S. territories.

Mission: The National Council of State Boards of Nursing (NCSBN), composed of Member Boards, provides leadership to advance regulatory excellence for public protection.

CNA DISCIPLINARY ACTION

OCTOBER-NOVEMBER-DECEMBER 2006

EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE	VIOLATION(S)
10/2/2006	Aguayo, Ana M	CNA999993981	Civil Penalty	Criminal Conviction-Misdemeanor; Against Property
10/4/2006	Almo, Rebecca J	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Failure to Cooperate
11/24/2006	Ayala, Michael T	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Failure to Cooperate
10/27/2006	Baedeker, David L	CNA967890133	Revoked	Violating Board Order
10/27/2006	Bankhead, Lola R	CNA284814070	Revoked	Violating Board Order
12/29/2006	Barnett, Stacey L	CNA999996266	Revoked	Violating Board Order
12/29/2006	Baustian, Rose M	CNA1000000199	Revoked	Failure to Follow Orders; Drug Abuse; Violating Board Order
12/26/2006	Begay, Bobbinett	CNA1000002087	Stayed Revocation	Verbal Abuse; Criminal Conviction-Misdemeanor; Drug Related
12/7/2006	Beitel, Sheila M	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Drug Abuse
10/24/2006	Benally, Katherine	CNA1000010882	Civil Penalty	Criminal Conviction-Misdemeanor
10/27/2006	Bennett, Shaunna M	CNA1000001640	Revoked	Violating Board Order
12/29/2006	Berchman, Nellie	CNA026439103	Revoked	Violating Board Order
12/29/2006	Billie, Valerena	CNA999949268	Revoked	Violating Board Order
10/25/2006	Bracamonte, Georgina M	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor
10/27/2006	Breton, Deborah K	CNA999993839	Revoked	Failure to Follow Orders; Drug Use on Duty; Failure to Maintain Minimal Standards
12/29/2006	Brown, James E	CNA999950341	Revoked	Violating Board Order
12/29/2006	Burgess, Sherri L	CNA435913294	Revoked	Criminal Conviction-Felony; Failure to Cooperate
10/27/2006	Cain, Rachelle M	CNA999992193	Revoked	Violating Board Order
10/24/2006	Carlson, Colleen E	CNA Applicant	Certificate Denied	Drug Abuse; Failure to Cooperate
12/29/2006	Chavez, Carmen A	CNA1000004129	Revoked	Violating Board Order
11/30/2006	Coons, Holly J	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Alcohol Abuse
10/27/2006	Cope, Alesha A	CNA292926197	Revoked	Violating Board Order
10/6/2006	Davis, Michael L	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Drug Related
12/26/2006	Demmon, Michelle R	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor
10/12/2006	Dixon, Debbie M	CNA1000000826	Voluntary Surrender	Criminal Conviction-Misdemeanor; Alcohol Abuse; Failure to Cooperate
12/29/2006	Dowling, Carmen K	CNA999994126	Revoked	Criminal Conviction-Misdemeanor; Failure to Follow Orders; Verbal Abuse
10/27/2006	Duncan, Pamela M	CNA999992074	Revoked	Violating Board Order
11/24/2006	Durgin, Lorraine C	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Failure to Cooperate
11/22/2006	Fikes, Timothy A	CNA1000008848	Civil Penalty	Verbal Abuse
11/15/2006	Flores, Frank	CNA022566103	Stayed Revocation	Theft - Client
11/27/2006	Fortin, Kristen G	CNA999988782	Voluntary Surrender	Presenting Illegal RX; Drug Related
12/29/2006	Fredericks, Marcy Lee	CNA1000007080	Revoked	Violating Board Order
12/29/2006	Freeland, Katherine F	CNA999998342	Revoked	Criminal Conviction-Misdemeanor; Alcohol Abuse; Failure to Cooperate
12/19/2006	Gibbons, Jay W	CNA1000011243	Stayed Revocation	Criminal Conviction-Misdemeanor; Drug Abuse; Alcohol Abuse
11/7/2006	Gomez, Melinda M	CNA999997219	Civil Penalty	Failure to Follow Orders; Neglect
12/26/2006	Gonzalez, Michael S	CNA Applicant	Certificate Denied	Criminal Conviction
10/24/2006	Groom, Jeffery E	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Physical Abuse; Failure to Cooperate
10/5/2006	Grossley, Shaun M	CNA Applicant	Certificate Denied	Drug Related; Failure to Cooperate
12/26/2006	Hadfield, Jennifer A	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Alcohol Abuse
10/27/2006	Hall, Kelley M	CNA999991876	Revoked	Violating Board Order
12/26/2006	Hampton, Maurice L	CNA Applicant	Certificate Denied	Failure to Cooperate
10/25/2006	Hansen, Skye M	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Alcohol Abuse; Failure to Cooperate
10/25/2006	Harvey, Robert J	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor
10/5/2006	Hemphill, Pamela L	CNA Applicant	Certificate Denied	Criminal Conviction-Felony; Drug Related
11/24/2006	Hernandez, Frances L	CNA Applicant	Certificate Denied	Criminal Conviction
11/24/2006	Hunt, Jeffery M	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Failure to Cooperate; Alcohol Abuse

CNA DISCIPLINARY ACTION

*Not reported in previous Newsletter

OCTOBER-NOVEMBER-DECEMBER 2006

EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE	VIOLATION(S)
10/27/2006	Johnson, Hazel M	CNA485133103	Revoked	Criminal Conviction-Misdemeanor; Drug Related; Failure to Cooperate
12/6/2006	Johnson, Paul	CNA1000011098	Civil Penalty	Criminal Conviction-Misdemeanor
10/27/2006	Johnson, Rosie L	CNA946067103	Revoked	Violating Board Order
11/24/2006	Johnson, Warquida M	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Failure to Cooperate
11/22/2006	Jones, Anthony	CNA Applicant	Civil Penalty	Criminal Conviction
12/29/2006	Joseph, Sharon P	CNA593027803	Revoked	Violating Board Order
12/26/2006	Juarez, Daniel F	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor
10/5/2006	Kershner, Camille A	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Failure to Cooperate
11/3/2006	Kipka, Nancy E	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Alcohol Abuse
10/25/2006	Kremer, Jennifer K	CNA190512263	Renewal Denied	Criminal Conviction-Misdemeanor; Drug Related; Failure to Cooperate
10/18/2006	Laramie, Sharon J	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Alcohol Abuse; Obtaining Certificate by Fraud; Failure to Cooperate
10/3/2006	Lee, Edward W	CNA1000010679	Suspension	Criminal Conviction-Misdemeanor; Against Property; Drug Related
10/26/2006	Leonard, Sherry L	CNA Applicant	Certificate Denied	Drug Abuse
12/26/2006	Lester, Merisha M	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Alcohol Abuse
11/24/2006	Lopez, Diana M	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Alcohol Abuse
12/26/2006	Lopez, Jorge E	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Alcohol Abuse
*9/13/2006	Madrid, Clarissa J	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor
11/24/2006	Mcduffey, Gilda R	CNA Applicant	Certificate Denied	Failure to Cooperate, Criminal Conviction
11/24/2006	McKee, Kathleen M	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Verbal Abuse; Physical Abuse
12/29/2006	McKenzie, Michele M	CNA1000005622	Revoked	Violating Board Order
10/27/2006	Miller, Genny M	CNA1000000635	Revoked	Failure to Follow Orders; Neglect; Verbal Abuse
*9/21/2006	Miller, Kathy A	CNA999990283	Civil Penalty	Failure to Follow Orders; Verbal Abuse
12/29/2006	Miranda, Sandra A	CNA999988010	Revoked	Criminal Conviction-Felony; Theft - Client
10/27/2006	Morales, Annette	CNA848220353	Revoked	Violating Board Order
10/25/2006	Morales, Esmeralda	CNA792367353	Certificate Denied	Criminal Conviction-Misdemeanor; Alcohol Abuse; Failure to Cooperate
11/24/2006	Moreno, Alvina D	CNA999992357	Revoked	Criminal Conviction-Misdemeanor; Failure to Follow Orders; Failure to Cooperate
12/26/2006	Morrissey, James T	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Alcohol Abuse
12/22/2006	Niemeyer, Jeana L	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Theft - Employer
12/29/2006	Nunez, Jeanette C	CNA1000005892	Revoked	Criminal Conviction-Misdemeanor; Failure to Cooperate
12/29/2006	Ojeda, Maria E	CNA1000004754	Revoked	Violating Board Order
12/29/2006	Orantez, Maritza	CNA031910641	Revoked	Leaving Duty Station; Failure to Cooperate
12/29/2006	Ortiz, Monica L	CNA999990126	Revoked	Violating Board Order
12/4/2006	Osborne, Rita M	CNA1000006874	Civil Penalty	Practicing Beyond Scope
12/29/2006	Pelter, Michael N	CNA1000007339	Revoked	Physical Abuse; Verbal Abuse; Violating Board Order
10/27/2006	Pulbratek, Shawna R	CNA999991886	Revoked	Violating Board Order
11/15/2006	Quasula, Jaimy P	CNA100001015	Civil Penalty	Criminal Conviction-Misdemeanor; Alcohol Abuse
10/27/2006	Quihuis, Teresa A	CNA1000002374	Revoked	Violating Board Order
12/29/2006	Quintana, Thelma K	CNA999999854	Revoked	Violating Board Order
10/11/2006	Reed, Christine A	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Drug Related
10/5/2006	Rivera-Megathan, Lucy	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Failure to Cooperate
10/24/2006	Salaiz, Reyes C	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Failure to Cooperate
*9/22/2006	Seebert, Kelly M	CNA1000006501	Civil Penalty	Breach of Confidentiality; Failure to Follow Orders
10/5/2006	Sermenon, Ruben F	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Failure to Cooperate
12/29/2006	Serna, Tawnya I	CNA999952562	Revoked	Criminal Conviction-Misdemeanor; Fraud/Deceit; Failure to Renew; Failure to Cooperate
12/22/2006	Silva, Ricardo J	CNA Applicant	Certificate Denied	Criminal Conviction-Felony; Failure to Cooperate
11/1/2006	Slimp, Dollie	CNA977413289	Renewal Denied	Criminal Conviction-Misdemeanor; Failure to Report Violations
12/8/2006	Stalling, Ryan	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Against Person; Alcohol Abuse
10/27/2006	Starr, Sandra J	CNA083232803	Revoked	Violating Board Order

CNA DISCIPLINARY ACTION

*Not reported in previous Newsletter

OCTOBER-NOVEMBER-DECEMBER 2006

EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE	VIOLATION(S)
*9/28/2006	Stewart, Adrienne A	CNA362271279	Civil Penalty	Drug Use on Duty; Failure to Maintain Minimal Standards
10/10/2006	Tachine, Etta M	CNA486439803	Civil Penalty	Verbal Abuse
12/26/2006	Tatum, Ebonystar J	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor
12/29/2006	Tautimez, Socorro T	CNA373537803	Revoked	Violating Board Order
11/15/2006	Taylor, Cynthia J	CNA456529103	Civil Penalty	Verbal Abuse; Failure to Cooperate
10/23/2006	Thomas, Shonnett L	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Failure to Cooperate
10/4/2006	Thunderhawk, Anais A	CNA Applicant	Certificate Denied	Failure to Cooperate
11/24/2006	Turner, John T	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Failure to Cooperate; Alcohol Abuse
10/27/2006	Tuttle, Casandra K	CNA1000003915	Revoked	Violating Board Order
12/8/2006	Valadez, Christina	CNA Applicant	Certificate Denied	Criminal Conviction-Felony; Drug Related
11/27/2006	Van Ausdall, Patricia A	CNA1000005689	Stayed Revocation	Failure to Follow Orders; Leaving Duty Station
10/13/2006	Varner, Michelle L	CNA Applicant	Certificate Denied	Criminal Conviction-Drug Related; Drug Abuse
10/27/2006	Widener, Tamara L	CNA999993619	Revoked	Violating Board Order
12/8/2006	Williams, Tracy L	CNA Applicant	Certificate Denied	Criminal Conviction-Felony
11/24/2006	Yantis, Rhonda L	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor
10/27/2006	Young, Curtistine M	CNA999991932	Stayed Revocation	Failure to Follow Orders; Physical Abuse; Verbal Abuse
10/25/2006	Zamora, Dorothy M	CNA Applicant	Certificate Denied	Criminal Conviction-Misdemeanor; Drug Abuse; Failure to Cooperate
7/12/2006	Yazzie, Darlene D	CNA597918353	Stayed Revocation	Criminal Conviction-Misdemeanor; Alcohol Abuse; Failure to Cooperate

CNA Discipline ACTION CLEARED NOVEMBER-DECEMBER 2006 • JANUARY 2007

EFFECTIVE DATE	NAME	CERTIFICATE
12/14/2006	Severin, Teena M	CNA1000007860
12/15/2006	Leatherwood, Stephanie M	CNA999991924
12/19/2006	Taylor, Jacqueline	CNA308673580
10/6/2006	Daily, Juanita D	CNA999992388
10/18/2006	Kinney, Diana P	CNA1000004279

**RN/LPN DISCIPLINARY ACTION**

*Not reported in previous Newsletter

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EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE	VIOLATION(S)
12/26/2006	Adams, Janine M.	Compact State, LPN - IA	Revocation-Privilege to Practice	Misconduct
11/15/2006	Ash, Doris B.	RN063856	Probation Violations	Failure to Follow Orders, Medication Errors, Failure to Report
11/27/2006	Avino, Daniel V.	RN095282	Decree of Censure	Failure to Assess, Failure to Intervene
9/19/2006*	Balmer, Brienna L.	RN141825	Probation	Criminal Conviction-Misdemeanor, Alcohol Abuse
11/22/2006	Bannister, Betty J.	LP040041	Decree of Censure	Practicing Beyond Scope
9/8/2006*	Bice, Jan L.	RN117230	Voluntary Surrender	Violating Board Order
11/15/2006	Blough, Donna F.	LP013939	Civil Penalty	Failure to Intervene, Documentation Errors
10/5/2006	Bode, Sandra M.	RN078224	Stayed Revocation w/Probation	Failure to Comply w/Requirements/Impaired Nurse Program
10/27/2006	Brainard, Michele R.	LP029753	Revocation	Violating Board Order
10/6/2006	Burr, James J.	RN142146	Probation	Unprofessional Conduct, Fraud, Deceit-Obtaining License
10/18/2006	Calzada, Maria G.	RN107811	Probation Neglect	Failure to Maintain Minimal Standards, Failure to Follow Orders,
10/23/2006	Camagay, Marvin P.	RN Endorsement	License Denied	Practicing without License, Fraud, Deceit-Obtaining License
7/26/2006*	Carothers Taylor, Marie A.	RN092425	Revocation	Violating Board Order

EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE	VIOLATION(S)
10/16/2006	Chastain, Benjamin	Compact State, RN - TX	Revocation-Privilege to Practice	Drug Diversion
12/26/2006	Cizek, Robert E.	LPN Endorsement	License Denied	Criminal Conviction, Failure to Cooperate with Board
9/13/2006*	Clouse, Sheryl A.	RN106805	Probation	Documentation Errors, Misconduct-False Documentation
7/13/2006*	Cook, Melissa H.	RN070956	Suspension	Violating Board Order
12/22/2006	Corder, Sandy G.	RN Endorsement	License Denied	Action in Another Jurisdiction
11/22/2006	Cota, David M.	RN114848/LP034555	Suspension	Violating Board Order
12/18/2006	Council, Cary D.	LP029843	Decree of Censure	Misconduct-Verbal Abuse
10/25/2006	Davis, Kirsti L.	RN125091	Voluntary Surrender	Failure to Comply w/Requirements/Impaired Nurse Program
11/27/2006	Delisa, Susan S.	RN025332	Decree of Censure	Failure to Follow Orders, Unprofessional Conduct
10/5/2006	Dobrzanski, Holly M.	LP028527	Decree of Censure	Unsafe Practice, Medication Errors
12/9/2006	Ely, Kelly K.	RN063864	Decree of Censure	Failure to Intervene, Inappropriate Delegation
12/6/2006	Erlinger, Debra S.	RN111786	Decree of Censure	Misconduct-False Documentation, Misconduct-Theft, Fraudulent Billing
11/25/2006	Farrell, Rosemarie	TRN143007	Civil Penalty	Drug Related-Positive Drug Screen
12/6/2006	Faulkner, Melissa S.	RN138762	Civil Penalty	Practicing without License
11/6/2006	Faulkner, Robert D.	RN083342	Revocation	Violating Board Order
10/10/2006	Fulton, Ora M.	LP033491	Decree of Censure	Drug Related-Positive Drug Screen
9/19/2006*	Furnas-Woolman, Angela S.	RN066887	Voluntary Surrender	Violating Board Order
10/27/2006	Gale, Holly H.	RN107134/LP029607	Revocation	Violating Board Order
12/26/2006	Gibson, David M.	RN Endorsement	License Denied	Criminal Conviction-Misdemeanor, Failure to Cooperate with Board
10/3/2006	Giratore, Jessica L.	LP042593	Civil Penalty	Criminal Conviction-Misdemeanor, Misconduct
12/22/2006	Gooden, Regina A.	RN Endorsement	License Denied	Criminal Conviction-Misdemeanor, Failure to Cooperate with Board
8/9/2006*	Gragg, Lalita M.	LP038246	Revocation	Violating Board Order
12/1/2006	Gutierrez, Janice M.	RN092079	Voluntary Surrender	Unsafe Practice, Failure to Assess, Documentation Errors
11/15/2006	Ham, Marilyn S.	LP024985	Voluntary Surrender	Violating Board Order
11/16/2006	Hamilton, Beverly	RN142608	Civil Penalty	Practicing without License
11/6/2006	Hanks, Carol D.	RN027706	Voluntary Surrender	Drug Use on Duty
11/28/2006	Harbour, Jeanette R.	RN134592/LP040285	Decree of Censure	Failure to Intervene
11/24/2006	Haynes, Trudy L.	LP023925	Revocation	Criminal Conviction-Misdemeanor, Alcohol Abuse, Failure to Comply w/Requirements/Impaired Nurse Program
10/16/2006	Hearn, Heather S.	RN Endorsement	License Denied Conduct	Criminal Conviction-Felony, Against Property, Unprofessional
11/16/2006	Hicks, Marcia J.	RN109517	Voluntary Surrender	Violating Board Order
10/12/2006	Hierling, Anne B.	RN028220	Voluntary Surrender	Unsafe Practice, Drug Abuse, Drug Use on Duty
9/12/2006*	Holliday, Ronda R.	RN086565	Decree of Censure	Failure to Follow Orders, Neglect
11/6/2006	Howell, Daniel L.	LP016620	Voluntary Surrender	Misconduct-Physical Abuse
9/11/2006*	Hulderman, Steven D.	RN074462	Decree of Censure	Misconduct
12/1/2006	Iglesias, Kong S.	RN111985/LP033517	Probation	Failure to Maintain Minimal Standards
9/22/2006*	Inger, David	RN141947/ CNA1000001942	Civil Penalty	Criminal Conviction-Misdemeanor, Violating State/Federal Statutes/Rules, Failure to Cooperate with Board
10/16/2006	Iwunze, Eunice C.	LP032436	Suspension	Violating Board Order
11/21/2006	Jacques, Yvette B.	RN092380	Stayed Revocation w/Suspension	Drug Abuse, Drug Diversion, Failure to Comply w/Requirements/Impaired Nurse Program
9/11/2006*	Jacquette, Rose A.	RN060545/LP019989	Civil Penalty	Failure to Maintain Minimal Standards, Failure to Intervene, Failure to Supervise
11/6/2006	James, Lori R.	LP020565	Stayed Revocation w/ Probation and Civil Penalty	Misconduct, Fraud, Deceit-Cheating
9/1/2006*	Jebens, Rheta L.	LP033618	Revocation	Failure to Maintain Minimal Standards, Failure to Follow Orders, Drug Abuse
8/10/2006*	Johns, Kenneth C.	RN060577/LP019501	Stayed Revocation w/Probation	Violating Board Order

EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE	VIOLATION(S)
11/15/2006	Johnson, Cassandra R	LP038708	Decree of Censure	Verbal Abuse
12/15/2006	Jones, Martha M.	RN059962	Revocation	Violating Board Order
10/17/2006	Jones, Sandra M.	LP031384	Revocation	Alcohol Abuse, Violating Board Order
9/24/2006*	Jones, Syvera E.	LP041912	Civil Penalty	Criminal Conviction-Misdemeanor, Drug Related
10/9/2006	Jourden, Sally S.	RN106013	Decree of Censure	Failure to Maintain Minimal Standards, Medication Errors
10/27/2006	Keith, Clifford A.	RN091526	Revocation	Misconduct-Theft, Failure to Report Violations
11/16/2006	Kendall, Julia F.	RN098088	Probation	Alcohol Abuse
9/8/2006*	Koslowski, Werner S.	LP042496	Stayed Revocation w/Suspension	Criminal Conviction-Drug Related, Positive Drug Screen
12/19/2006	Koslowski, Werner S.	LP042496	Stayed Revocation w/Probation	Stayed Revocation Suspension Completed
10/26/2006	Kottke, Cynthia M.	RN Endorsement	License Denied	Criminal Conviction-Misdemeanor, Against Person & Against Property
10/9/2006	Lambert, Rebecca J.	RN086672	Decree of Censure	Unsafe Practice, Failure to Follow Orders, Positive Drug Screen
12/20/2006	Larumbe, Jul Jay	RN136386	Decree of Censure	Failure to Maintain Minimal Standards
11/14/2006	Lawn, Diana M.	RN096118	Voluntary Surrender	Misconduct-Verbal Abuse, Alcohol Abuse
10/16/2006	Lawrence, Patricia A.	RN111274	Revocation	Violating Board Order
11/16/2006	Leek, Tian N.	LP042691	Civil Penalty	Criminal Conviction, Fraud, Deceit-Obtaining License
10/27/2006	Leonard, Daniel L.	RN104918	Revocation	Violating Board Order
9/22/2006*	Lerner, Jo Marie	RN117295	Revocation	Violating Board Order
11/16/2006	Long, David R.	RN073487	Voluntary Surrender	Drug Diversion
11/15/2006	MacMaster, Robert P.	RN107531	Revocation	Violating Board Order
10/10/2006	Maffei, Lisa	RN102575	Stayed Revocation w/Suspension	Drug Abuse, Failure to Comply w/Requirements/Impaired Nurse Program
12/6/2006	Maffei, Lisa	RN102575	Stayed Suspension w/Probation	Stayed Revocation/Suspension Completed
10/10/2006	Mahoney, Virginia E.	RN089744	Decree of Censure	Failure to Maintain Minimal Standards, Failure to Follow Orders
7/7/2006*	Marsh, Audrey L.	RN085435	Revocation	Violating Board Order
10/12/2006	McKinion, Robbin L.	RN108244/AP1032/ AP1033/LP022962	Voluntary Surrender	Practicing without License, Violating Board Order, Failure to Cooperate with Board
12/13/2006	McLaughlin, Linda S.	RN068858/AP0191	Decree of Censure	DX Errors (APRN)
10/4/2006	Middleton, Judith	LP033184	Voluntary Surrender	Failure to Cooperate with Board
12/20/2006	Miller, Maria B.	RN025675	Voluntary Surrender	Incompetent Practice
8/11/2006*	Milton II, Eric F.	LP041535	Suspension	Violating Board Order
10/27/2006	Mireles, Luis	RN106228	Revocation	Violating Board Order
11/16/2006	Mondalto, Demeris	RN072734	Decree of Censure	Misconduct-Physical Abuse, Verbal Abuse
10/19/2006	Monterroso, Sandra M.		LP Endorsement	License Denied Incompetent Practice, Action in Another Jurisdiction, Failure to Cooperate with Board
11/2/2006	Moore, Jennifer L.	LP041064	Voluntary Surrender	Violating Board Order
9/26/2006*	Moore, Leslie W.	RN082627	Voluntary Surrender	Alcohol Abuse
12/14/2006	Morava Jr., Richard	RN064779	Voluntary Surrender	Violating Board Order
10/17/2006	Munguia, Christal R.	RN111457/LP035122	Voluntary Surrender	Drug Abuse, Failure to Comply w/Requirements/Impaired Nurse Program
12/18/2006	Navarro, Wendy S.	RN131714/LP039399	Decree of Censure	Failure to Report Violations
8/8/2006*	Nearon, Anita L.	RN104791/AP314	Civil Penalty	Unsafe Practice, Other (APRN)
11/6/2006	Neidert, Kathleen M.	RN113435	Voluntary Surrender	Action in Another Jurisdiction
9/13/2006*	Neville, Marilyn R.	LP036560	Revocation	Violating Board Order
10/12/2006	Nolan, Richard L.	RN056815	Decree of Censure	Failure to Maintain Minimal Standards, Unsafe Practice, Failure to Follow Orders
10/13/2006	Nolte, Vicki S.	RN108240/LP033096	Probation	Presenting Illegal RX
10/10/2006	Norris, Marilyn J.	LP020625	Civil Penalty	Unprofessional Conduct

REVISED
1:31 pm, Mar 27, 2007

EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE	VIOLATION(S)
11/15/2006	Pablo, Hester K.	LP035308	Revocation	Violating Board Order
10/5/2006	Palisoc, Romeo P.	LP040779	Civil Penalty	Failure to Maintain Minimal Standards, Misconduct-Breach of Confidentiality
9/22/2006*	Palmer, Beryl F.	LP037159	Decree of Censure	Practicing Beyond Scope
10/13/2006	Payne, Deborah A.	RN113821/LP035496	Probation	Criminal Conviction-Misdemeanor
10/27/2006	Pelton, Joanna	RN085545	Revocation	Alcohol Abuse, Violating Board Order
9/30/2006*	Pergrin, Jessie V.	RN030045	Decree of Censure	Practicing Beyond Scope
10/3/2006	Perkins, Cameo M.	RN142051	Probation	Criminal Conviction-Misdemeanor, Alcohol Abuse
11/30/2006	Peterson, Peggy L.	RN102700	Voluntary Surrender	Violating Board Order
11/3/2006	Powell, Stacie	RN080022	Revocation	Violating Board Order
9/28/2006*	Rauch, Bryan W.	RN098768/LP031444	Revocation	Criminal Conviction-Misdemeanor, Failure to Comply w/Requirements/Impaired Nurse Program
10/18/2006	Rauchwarter, Mary H.	RN061146	Revocation	Drug Abuse, Violating Board Order
8/10/2006*	Ray, Carole J.	LP040800	Revocation	Violating Board Order
11/6/2006	Reising, Karen S.	RN130192	Suspension	Violating Board Order
11/21/2006	Rich, Angela	RN142981	Probation	Medication Errors
12/7/2006	Riviotta, Nancy L.	RN095171/LP030644	Suspension	Violating Board Order
10/2/2006	Robinson, Cheryl D.	RN104684	Revocation	Violating Board Order
12/28/2006	Rose, Linda Lee	RN085931	Voluntary Surrender	Alcohol Abuse
10/7/2006	Roy, Rosalie	RN108754	Decree of Censure	Failure to Follow Orders, Failure to Intervene
10/27/2006	Rurka, Michelle C.	RN106081/LP034291	Revocation	Drug Abuse, Drug Use on Duty
11/16/2006	Sather, William P.	RN129380	Voluntary Surrender	Drug Abuse, Drug Diversion, Failure to Comply w/Requirements/Impaired Nurse Program
11/16/2006	Sinclair, Susan F.	RN069303	Voluntary Surrender	Violating Board Order, Failure to Cooperate with Board
10/6/2006	Sloan, Walter J.	RN063133	Revocation	Violating Board Order
9/19/2006*	Smith, MacGregor J.	RN141784	Civil Penalty	Criminal Conviction-Misdemeanor, Drug Related, Alcohol Abuse
11/25/2006	Smith, Mary C.	RN047376	Decree of Censure	Drug Abuse
11/18/2006	Stayer, Rochelle L.	LP040346	Suspension/Indefinite	Failure to Maintain Minimal Standards, Medication Errors
11/15/2006	Stepp, David A.	RN127460	Probation	Documentation Errors, Medication Errors, Misconduct
9/1/2006*	Stover-Wall, Tracey	RN127278	Revocation	Failure to Comply w/Requirements/Impaired Nurse Program
12/29/2006	Struse, Marilyn J.	RN087488	Stayed Revocation w/Probation	Violating Board Order
12/1/2006	Therrell, Thomas N.	RN Endorsement	License Denied	Criminal Conviction-Misdemeanor, Failure to Cooperate with Board
11/16/2006	Ulibarri, Sherri	RN058001	Stayed Revocation w/Suspension	Alcohol Abuse, Failure to Comply w/Requirements/Impaired Nurse Program
12/27/2006	Vanderwaall, Kathy J.	RN086592/LP026986	Stayed Revocation w/Probation	Drug Abuse, Failure to Comply w/Requirements/Impaired Nurse Program
8/10/2006*	Watson, Christina D.	RN141003	Probation	Criminal Conviction-Misdemeanor, Alcohol Abuse
11/13/2006	West, Michelle L.	RN108072/LP033416	Suspension	Violating Board Order
9/1/2006*	White, Brenda B.	RN081808	Revocation	Drug Abuse, Failure to Comply w/Requirements/Impaired Nurse Program
12/29/2006	White, Sherryl Ann	LP038018	Revocation	Failure to Maintain Minimal Standards, Medication Errors, Misconduct-Verbal Abuse
11/5/2006	Willis, Milledge C.	RN088553	Voluntary Surrender	Criminal Conviction-Against Person
10/13/2006	Wilson, Danielle F.	RN128941/LP038243	Stayed Revocation w/Suspension	Criminal Conviction-Drug Related, Drug Abuse
11/15/2006	Wilson, Danielle F.	RN128941/LP038243	Revocation	Violating Board Order
12/8/2006	Wilson, Nydia A.	RN127573	Decree of Censure	Unsafe Practice, Executing Inappropriate Orders
10/11/2006	Wright, Judith K.	RN046994	Decree of Censure	Failure to Maintain Minimal Standards, Misconduct-Physical Abuse
11/15/2006	Wright, Robert W.	RN965970	Decree of Censure with Fine	Violating Board Order
9/12/2006*	Yazzie, Henrietta J.	RN117739	Suspension/Indefinite	Failure to Maintain Minimal Standards, Medication Errors, Inability to Practice Safely
11/8/2006	Zrna, Roberta J.	RN112870	Voluntary Surrender	Violating Board Order

Discipline Action Cleared for RNs/LPNs

EFFECTIVE DATE	NAME LICENSE
12/13/2006	Barton, Marvin RN124273
12/26/2006	Beitzel, Barbara LP024335
10/16/2006	Brewer, David M. RN123156/CRNA0264
10/16/2006	Brock, Heather A. RN094826
11/17/2006	Clark, Michelle L. RN121032/LP033586
12/23/2006	Foust, Beverly A. RN096685
12/18/2006	Gomez, Lillian E. RN060516
11/16/2006	Gundlach, Ginette G. RN130469
11/15/2006	Holder, Karen V. RN036046/AP0302
11/16/2006	Hopkins, Regenia S. LP011410
12/14/2006	Howard, Karen R. RN087813
11/28/2006	Huber-Murdock, Cheryl RN035180
11/15/2006	Knoettgen, Sheri K. LP037292
11/16/2006	Mozdziesc, Dale A. RN079882
11/16/2006	Unruh, Autumn M. LP037617
11/15/2006	Wells, Johnny B. RN129007
11/17/2006	Wood, Kelly A. RN086858/LP028437

